DATENT	APPLICATI	ON FEE D	FTFRMINA	MOITA	RECORD
PAICIVI	AFFLIVAL	ON FEE D	CI CITIAS II AN	711011	

Effective October 1, 2000

Application or Docket Number AUS 92の105円フUSI

			(Column 1)		(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS		17				R	ATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA .		BAS	IC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			(7 minus 20=		• Ø		X	§ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 = *		* /	2		40=		OR	X80=	160
MULTIPLE DEPENDENT CLAIM PRESENT						+1	35=		OR	+270=		
* If the difference in column 1 is less than zero, enter "				r "0" in c	olumn 2	.TC	TAL		OR	TOTAL	870	
CLAIMS AS AMENDED) - PAR	PART II		•			3	OTHER		
(Column 1)						(Column 3)	SN	IALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	X	§ 9=		OR	X\$18=	
AME	Independent		Minus	***	T 01 4154	=	X	40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	35=		OR	+270=		
								TOTAL T. FEE		OR	TÖTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	ADDI	1. 1 22			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREV	HEST MBER IOUSLY) FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO.	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	=	=	X	40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	I CLAIM		+1	35=		OR	+270=	
								TOTAL IT. FEE	<u>-</u>		TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	AUU	II. FEE			ADDIT. I EE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=	
WEI	Independent	*	Minus	***		=	×	40=		OR	X80=	
ľ	FIRST PRESE	ENTATION OF M	IULTIPLE DE	PENDEN	II CLAIM		+1	35=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												